CLAIMS ONLY	Application Number	Filing Date
	10/772377	
	Applicant(s)	

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			•		•		•	
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1	)						51						
2	)						52						
3		)					53						
4		)					54						
5		)					55						
6		)					56						
7		)					57						
8		)					58						
9		)					59						
10		/					60						
11		/					61						
12		/					62						
13		)					63						
14		/					64						
15	)						65						
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17		)					67						
18		)					68						
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42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
Total Indep	4						Total Indep						
Total Depend	14						Total Depend						
Total Claims	18						Total Claims						